• PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

Application or Docket Number 09/536328

CLAIMS AS FILED - PART I (Column 2)									SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE	Un I I	RATE	FEE
							-	1	NAIE	345.00	·	TAIL	690.00
BASIC FEE										345.00	OR		090.00
TO	TAL CLAIMS		2,2 minus 20=・ん						X\$ 9=	18	OR	X\$18=	
IND	EPENDENT CL	AIMS		7 minus 3 = *					X39=		OR	X78≃	
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		ΟŖ	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL	363	OR	TOTAL	
CLAIMS AS AMENDED - PART II									. '		•	OTHER	THAN
(Column 1) (Column 2) (Column 3)									SMALL	ENTITY	OR	SMALL	NTITY
AMENDMENT A	5-2-0b	CLAIMS REMAINING AFTER AMENDMEN				HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 2	30	Minus	**	22	,		X\$ 9=		OR	X\$18=	. ,
	Independent	•	/ .	Minus	**		=		X39=		OR	X78=	•
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130=											OR	+260=	
											OR	TOTAL ADDIT, FEE	
ADDIT. FEEON ADI													
AMENDMENT B	C		AIMS		_	HIGHEST NUMBER	PRESENT	lr	·	ADDI-			ADDI-
		AF	AINING TER IDMENT			REVIOUSLY PAID FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•		Minus	**	•	= '		X\$ 9=		OR	X\$18=	·
	Independent	•		Minus	••		=		X39=		OR	X78=	
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											·	
· · · · · · · · · · · · · · · · · · ·									+130=		OR	+260=	
									TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	•	REM.	AIMS AINING TER IDMENT			HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total			Minus	**		=		X\$ 9= ·		OR	X\$18=	
	Independent	٠		Minus	**		=	lt	X39=		OR	X78=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										On		
* If the entry in column 1 is less than the entry in column 2 write "0" in column 3.											OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***TOTAL ADDIT. FEE													
	If the "Highest Nu The "Highest Nur	mber Pre	eviously Pa viously Pai	aid For" (Total o	r Inde	ependent) is the	highest number	er fou	nd in the ap	propriate bo	x in co	lumn 1.	